

Revision: HCFA-PM-87-4 (BERC)
MARCH 1987

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OMB. : 0939-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory Kansas

CASE MANAGEMENT SERVICES

- A. Target Group: All Medicaid recipients except Medicare/Medicaid (dual) beneficiaries, adult care home residents and foster care recipients.
- B. Areas of State in which services will be provided:
- ☐ Entire State
- ☒ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than statewide:
- Douglas County
Johnson County
Leavenworth County
Saline County
Sedgwick County
Shawnee County
Wyandotte County
- C. Comparability of Services
- ☒ Services are provided in accordance with section 1902(a)(10)(B) of the Act.
- ☐ Services are not comparable in amount, duration and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.
- D. Definition of Services:
- Case management services consist of primary medical care, and the responsibility for authorizing, locating, coordinating and monitoring all medical care for assigned recipients.
- E. Qualification of Providers:
- Case managers must be physicians licensed to practice medicine in Kansas, and be enrolled as a provider in the Kansas Medicaid Program in one of the following provider specialties: Family Practice, General Practice, Internal Medicine, Obstetrics/Gynecology, Pediatrics or Osteopathy.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory Kansas

- F. The state assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.
1. Eligible recipients will have free choice of the providers of case management services.
 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

This page is not applicable to Kansas because case management services are provided in accordance with a 1915 (b) waiver.

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19 STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT (2)

State/Territory: Kansas

CASE MANAGEMENT SERVICES

A. Target Group:

Persons who have been identified as long-term mentally ill as defined by the NIMH definition.

B. Areas of State in which services will be provided:

☒ Entire State.

☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide.

C. Comparability of Services:

☒ Services are provided in accordance with section 1902(a)(10)(B) of the Act.

☐ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Mental health targeted case management services are those services identified in a treatment plan approved by the physician which are provided to assist in resolving or minimizing the effects of a recipient's mental or emotional impairment for which clinical and/or hospital services have previously been provided. Mental health targeted case management services assist with gaining access to needed medical, social, educational and other services identified as necessary in the treatment plan.

E. Qualification of Providers:

Case management services are provided by those who are capable of insuring that the individuals receive needed services (community mental health centers and Medicaid-approved providers of partial hospitalization services).

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- F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.
1. Eligible recipients will have free choice of the providers of case management services.
 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

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19 STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT (3)

State/Territory: Kansas

CASE MANAGEMENT SERVICES

A. Target Group:

The target group consists of children participating in the Kan Be Healthy Program and who are technology dependent. These individuals are under the age of 22 and require daily ongoing medical care and monitoring by trained medical personnel because of chronic disability. The chronic disability must require the routine use of a medical device to compensate for the loss of respiratory function or require the need for total parenteral nutrition.

B. Areas of State in which services will be provided:

☒ Entire State.

☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide:

C. Comparability of Services:

☒ Services are provided in accordance with section 1902(a)(10)(B) of the Act.

☐ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Case management services for technology dependent children consist of referral for assessment, referral for treatment based upon the assessment, and the locating, coordinating and monitoring of the provision of services.

E. Qualification of Providers:

Providers of case management services for technology dependent children must be advanced registered nurse practitioners.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Kansas

- F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.
1. Eligible recipients will have free choice of the providers of case management services.
 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Kansas

CASE MANAGEMENT SERVICES

A. Target Group:

The target group consists of eligible Medicaid recipients under 1915(g) of P.L. 99-272, COBRA, with at least one prior hospitalization for a high risk, high cost condition, and not eligible for any other Medicaid case management services except the Primary Care Network (PCN). Selection of high risk recipients to receive case management services shall be in accordance with predictors of high cost care as determined by the provider and approved by the State. Case management services for Medicaid eligibles consist of assessment, linkage with identified services needed, including delivery of and/or locating and coordination of services by case managers.

B. Comparability of Services:

☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.

☒ Sections are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

C. Area of State in which services will be provided:

☐ Entire State.

☒ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide): Sedgwick County, Kansas.

D. Freedom of Choice:

The state assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible recipients will have free choice of the providers of case management services. Recipients can choose to participate or not; should they choose not to participate, they can rely on their PCN or regular physician.

2. Eligible recipients will have free choice of the providers of other medical care under the plan unless restricted by the PCN program.

E. Qualification of Providers:

Providers of case management services must be a hospital organization employing bachelor-prepared registered nurses with home health and medical surgical nursing experience beyond attainment of the degree, in addition to either the teaching of, or completion of a course in case management. The organization shall have a minimum of two years of past experience with providing case management services, and be available twenty-four hours per day to recipients.

KANSAS MEDICAID STATE PLAN

Attachment 3.1-A

#18.d.

3.1-A Limitation
#18.d. Skilled Nursing Facility Services
for Patients Under 21 Years

23d 24a

Services rendered to recipients under the age of sixteen require prior authorization.

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KANSAS MEDICAID STATE PLAN

Attachment 3.1-A

#23.0

24e

Emergency Hospital Limitations

Emergency hospital services for certain alien individuals who qualify for legalization status under the Immigration Reform and Control Act of 1986 and certain illegal alien individuals or temporary residents are limited to hospital emergency room services and the subsequent 48 hours of inpatient hospital services.

Ambulance services are noncovered.

KANSAS MEDICAID STATE PLAN

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~~#23.f.~~ 24f

Limitations of personal care services in a recipient's home, prescribed in accordance with a plan of treatment and provided by a qualified person under the supervision of a registered nurse

Medical attendant care for independent living is covered with prior authorization and up to a maximum of 24 hours a day. Medical attendant care for independent living is not covered at the same time as HCBS medical attendant during the same period of time.